

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>me G</i>		9/13/00
O.I.P.E. CLASSIFIER		48	9/18/00
FORMALITY REVIEW	<i>DSZ</i>	68608	10/21/2000
RESPONSE FORMALITY REVIEW		4749	12/25/00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	1	1	9/13/00
2	2	2	9/13/00
3	3	3	9/13/00
4	4	4	9/13/00
5	5	5	9/13/00
6	6	6	9/13/00
7	7	7	9/13/00
8	8	8	9/13/00
9	9	9	9/13/00
10	10	10	9/13/00
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12	12	12	9/13/00
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47	47	47	9/13/00
48	48	48	9/13/00
49	49	49	9/13/00
50	50	50	9/13/00

Claim	Final	Original	Date
51	51	51	9/13/00
52	52	52	9/13/00
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100	100	100	9/13/00

Claim	Final	Original	Date
101	101	101	9/13/00
102	102	102	9/13/00
103	103	103	9/13/00
104	104	104	9/13/00
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146	146	146	9/13/00
147	147	147	9/13/00
148	148	148	9/13/00
149	149	149	9/13/00
150	150	150	9/13/00

BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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